A good deal of air is exhaled over the state of medical care in America. Open state worshipers want a complete government takeover, while a more subtle band of state worshipers, the kind that like to call themselves advocates of limited government, propose instead to use “market incentives” to accomplish their aims. What neither party wants is to let free individuals choose their own aims, applying their own means (incomes) to accomplishing them.

The pseudo-debate is useful — to the pseudo-debaters, that is — because it keeps people’s minds off the real government-induced medical scandals, of which there are many.

For example, if you look carefully, you will learn that people who suffer chronic pain are routinely undertreated because their doctors fear that the U.S. Drug Enforcement Administration (DEA) will accuse them of being drug pushers, destroy their practices, wipe them out financially, and throw them in jail for good measure. This is no exaggeration. Doctors have even been charged with murder when a patient dies an apparently drug-related death.

The most recent case involved Dr. William Hurwitz of Virginia, who was convicted in December of 50 drug and conspiracy charges. Possible sentence: life in prison. What did he do? He treated many chronic-pain sufferers with opioids. The government claimed that a small percentage of them were faking and didn’t “need” the drugs. Some might have sold them in the black market. The prosecutors did not argue, much less prove, that Hurwitz actively conspired with anyone. Rather, they relied on a tacit-conspiracy theory, counting on the drug-hysterical jury to convict. They were not let down.

But this was only the latest travesty. Of course, the convictions are noticed by other doctors, who either stop treating chronic pain altogether or undertreat it in order to avoid the government’s talons.

Let’s pause to reflect: our all-wise and all-benevolent government has brought about a situation in which people with long-term pain have little choice but to suffer because their doctors live under a reign of terror.
When was the last time you heard your compassionate president, senator, or representative mention that?

The answer is never. In fact, what you hear are new commitments to redouble the so-called War on Drugs, which is really a war on drug consumers — including chronic-pain sufferers.

It was inevitable that drug prohibition would seriously affect the practice of medicine, all assurances to the contrary notwithstanding. And you thought prohibition would merely deprive junkies of their fixes. So goes the Law of Unintended Consequences.

The head of the DEA says there is no reason that good doctors should be hampered by its efforts. Karen Tandy pledges that her “goal is to ensure that patients with legitimate need have access to pain medications that relieve suffering and improve quality of life.... Doctors acting in good faith and in accordance with established medical norms should remain confident in their ability to prescribe appropriate pain medications.”

But as Reason magazine’s Jacob Sullum points out, that is no assurance at all. The DEA decides — after the fact — what “legitimate need” means, whether “established medical norms” are followed, and whether the prescriptions are “appropriate.” When you go the doctor, a prohibition agent is looking over his shoulder.

What could possibly be worth this cost? The prohibitionists will say that opioids are addictive. But Dr. Jane Orient, executive director of the Association of American Physicians and Surgeons, writes, “Today, there is considerable evidence that patients rarely, if ever, become junkies because of using opioids for pain relief — even though they are as dependent on the drugs as heart patients may be on their heart medicine.... The drugs have been literally lifesaving in countless patients who might otherwise have administered a gunshot wound to their head or suffered a fatal one-car accident.”

The war on drug users and doctors is the product of a totalitarian mentality. People should be able to buy whatever drugs they want, subject only to the principles of self-responsibility and liability. Doctors should be able to give their best advice to patients without fear of being second-guessed by prohibition agents. Until then, the government is indistinguishable from our enemy.

Other articles of interest on this subject (selected by the author except as noted):

**The Police State of Medicine**, by Dr. William Hurwitz

Remarks by Dr. William Hurwitz, MD to The Drug Policy Foundation, October 18, 1997, New Orleans, LA. Copyright © 1997 by Dr. William Hurwitz, MD. ...

**Dr. Hurwitz, MD On Trial:**

Pages from Our Chronic Pain Mission website;

See also (added by DeLuca, 2006-01-25): The Dr. William Hurwitz Collection; War on Pain Sufferers Series; and, http://www.doctordeluca.com/

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Addiction, Pain, & Public Health website - www.doctordeluca.com/